

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MW		04-04-01
O.I.P.E. CLASSIFIER		48	4/27/01
FORMALITY REVIEW	K.S.	355/702	05/31/01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	1091	9-26-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	1/17/01
1	✓
2	✓
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28	✓
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30	✓
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32	✓
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Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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3/01